# **PHA Plans**

# **Streamlined Annual Version**

U.S. Department of Housing and Urban Development
Office of Public and Indian

Office of Public and Indian

Housing

OMB No. 2577-0226

(exp. 05/31/2006)

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937 that introduced 5-year and annual PHA Plans. The full PHA plan provides a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form allows eligible PHAs to make a streamlined annual Plan submission to HUD consistent with HUD's efforts to provide regulatory relief for certain types of PHAs. Public reporting burden for this information collection is estimated to average 11.7 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

**Privacy Act Notice.** The United States Department of Housing and Urban Development, Federal Housing Administration, is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Information in PHA plans is publicly available.

Straamlinad Annual PHA Plan

Streamlined Annual PHA Plan for Fiscal Year: 2004

**PHA Name:** Lexington Housing Authority

609 East Third Street Lexington, NE 68850

(308) 324-4633

NOTE: This PHA Plan template (HUD-50075-SA) is to be completed in accordance with instructions contained in previous Notices PIH 99-33 (HA), 99-51 (HA), 2000-22 (HA), 2000-36 (HA), 2000-43 (HA), 2001-4 (HA), 2001-26 (HA), 2003-7 (HA), and any related notices HUD may subsequently issue.

### **Streamlined Annual PHA Plan Agency Identification**

PHA	PHA Name: Lexington Housing Authority PHA Number: NE010							
РНА	Fiscal Year Beginnin	g: (mm/	<b>yyyy</b> ) 07/2004					
Pub Number	olic Housing and Section of public housing units: 81	8 <b>Se</b>						
□PH	A Consortia: (check b	ox if subn	nitting a joint PHA P	lan and complete	table)			
	Participating PHAs	PHA Code	Program(s) Included in the Consortium	Programs Not in the Consortium	# of Units Each Program			
Participa								
Participa	nting PHA 2:							
Participa	nting PHA 3:							
Name: TDD: Publi Inforn (select	Diane K. Adams, Execut 308-324-6619  c Access to Informatination regarding any act all that apply) PHA's main administrati	ive Direct  on  ivities out  ve office	Email (if ava	nilable): lexha@co	ontacting:			
The PF public	HA Plan revised policies or review and inspection. select all that apply: Main administrative office PHA development manage Main administrative office.	r program Yes  ee of the Pagement off the of the lo	changes (including att  No.  HA  cices  ocal, county or State g	achments) are avai				
PHA P ⊠ □	Main business office of the			• • •	•			

### **Streamlined Annual PHA Plan** Fiscal Year 2004

[24 CFR Part 903.12(c)]

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	Accompany PHA Plan	

#### A. PHA PLAN COMPONENTS

1. Site-Based Waiting List Policies
3.7(b)(2) Policies on Eligibility, Selection, and Admissions
2. Capital Improvement Needs
3.7(g) Statement of Capital Improvements Needed
3. Section 8(y) Homeownership
3.7(k)(1)(i) Statement of Homeownership Programs
4. Project-Based Voucher Programs
5. PHA Statement of Consistency with Consolidated Plan. Complete only if PHA has
changed any policies, programs, or plan components from its last Annual Plan.
6. Supporting Documents Available for Review
7. Capital Fund Program and Capital Fund Program Replacement Housing Factor,
Annual Statement/Performance and Evaluation Report
8. Capital Fund Program 5-Year Action Plan

#### B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

**Form HUD-50076**, <u>PHA Certifications of Compliance with the PHA Plans and Related Regulations:</u> <u>Board Resolution to Accompany the Streamlined Annual Plan</u> identifying policies or programs the PHA has revised since submission of its last Annual Plan, and including Civil Rights certifications and assurances the changed policies were presented to the Resident Advisory Board for review and comment, approved by the PHA governing board, and made available for review and inspection at the PHA's principal office;

For PHAs Applying for Formula Capital Fund Program (CFP) Grants:

Form HUD-50070, Certification for a Drug-Free Workplace;

Form HUD-50071, Certification of Payments to Influence Federal Transactions; and

Form SF-LLL &SF-LLLa, Disclosure of Lobbying Activities.

PHA Name: Lexington Housing Authority

HA Code: NE010

### 1. Site-Based Waiting Lists (Eligibility, Selection, Admissions Policies)

[24 CFR Part 903.12(c), 903.7(b)(2)]

Exemptions: Section 8 only PHAs are not required to complete this component.

#### A. Site-Based Waiting Lists-Previous Year

1. Has the PHA operated one or more site-based waiting lists in the previous year? If yes, complete the following table; if not skip to B.

**Site-Based Waiting Lists** 

Development Information: (Name, number, location)	Date Initiated	Initial mix of Racial, Ethnic or Disability Demographics	Current mix of Racial, Ethnic or Disability Demographics since Initiation of SBWL	Percent change between initial and current mix of Racial, Ethnic, or Disability demographics				
at one time?	nit offers may	Ü	elopments to which fan	• 11 •				
4. Yes No: Is the PHA the subject of any pending fair housing complaint by HUD or any court order or settlement agreement? If yes, describe the order, agreement or complaint and describe how use of a site-based waiting list will not violate or be inconsistent with the order, agreement or complaint below:								
B. Site-Based Waiting Lists – Coming Year								
-	If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to next component.							
1. How many site	-based waiting	g lists will the PHA op	erate in the coming ye	ar?				

waiting list plan)?
If yes, how many lists?

2. The Yes No: Are any or all of the PHA's site-based waiting lists new for the upcoming

year (that is, they are not part of a previously-HUD-approved site based

2. Status of HOPE VI revitalization grant(s):

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PHA Name: Lexington Housing Authority

	HOPE VI Revitalization Grant Status
a. Development Nam	ne:
b. Development Nun	nber:
Revitalizat	tion Plan under development tion Plan submitted, pending approval tion Plan approved pursuant to an approved Revitalization Plan underway
3. ☐ Yes ⊠ No:	Does the PHA expect to apply for a HOPE VI Revitalization grant in the Plan year? If yes, list development name(s) below:
4. ☐ Yes ⊠ No:	Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? If yes, list developments or activities below:
5. ☐ Yes ⊠ No:	Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below:
	ant Based AssistanceSection 8(y) Homeownership Program FR Part 903.12(c), 903.7(k)(1)(i)]
1. ☐ Yes ⊠ No:	Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to the next component; if "yes", complete each program description below (copy and complete questions for each program identified.)
2. Program Descript	ion:
a. Size of Program  Yes No:	Will the PHA limit the number of families participating in the Section 8 homeownership option?
	If the answer to the question above was yes, what is the maximum number of participants this fiscal year?
b. PHA-established	eligibility criteria Will the PHA's program have eligibility criteria for participation in its

Section 8 Homeownership Option program in addition to HUD criteria?

If yes, list criteria:

c. What actions will the PHA undertake to implement the program this year (list)?
3. Capacity of the PHA to Administer a Section 8 Homeownership Program:
The PHA has demonstrated its capacity to administer the program by (select all that apply):  Establishing a minimum homeowner downpayment requirement of at least 3 percent of purchase price and requiring that at least 1 percent of the purchase price comes from the family's resources.
Requiring that financing for purchase of a home under its Section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards.
Partnering with a qualified agency or agencies to administer the program (list name(s)
and years of experience below):  Demonstrating that it has other relevant experience (list experience below):
4. Use of the Project-Based Voucher Program
Intent to Use Project-Based Assistance
☐ Yes ☒ No: Does the PHA plan to "project-base" any tenant-based Section 8 vouchers in the coming year? If the answer is "no," go to the next component. If yes, answer the following questions.
1.  Yes No: Are there circumstances indicating that the project basing of the units, rather than tenant-basing of the same amount of assistance is an appropriate option? If yes, check which circumstances apply:
low utilization rate for vouchers due to lack of suitable rental units access to neighborhoods outside of high poverty areas other (describe below:)
2. Indicate the number of units and general location of units (e.g. eligible census tracts or smaller areas within eligible census tracts):
5. PHA Statement of Consistency with the Consolidated Plan
[24 CFR Part 903.15] For each applicable Consolidated Plan, make the following statement (copy questions as many
times as necessary) only if the PHA has provided a certification listing program or policy changes from its last Annual Plan submission.
<ol> <li>Consolidated Plan jurisdiction: (provide name here) State of Nebraska</li> </ol>

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Co	nsolidated Plan for the jurisdiction: (select all that apply)
$\boxtimes$	The PHA has based its statement of needs of families on its waiting lists on the needs
	expressed in the Consolidated Plan/s.
	The PHA has participated in any consultation process organized and offered by the
	Consolidated Plan agency in the development of the Consolidated Plan.
	The PHA has consulted with the Consolidated Plan agency during the development of
	this PHA Plan.
	Activities to be undertaken by the PHA in the coming year are consistent with the
	initiatives contained in the Consolidated Plan. (list below)
	Other: (list below) Lexington Comprehensive Plan Update Dated 1999-2009 and the
	Executive Director has been involved in the recent Lexington Community Housing
	Survey process

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the

3. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below) Housing needs being continually reviewed by the Lexington Housing Authority and the City of Lexington are consistent with the Department of Economic Development's current Housing and Community Development Consolidated Plan.

The only change made to any policy since the last Agency Plan for Fiscal Year Ended June 30, 2003, was in the Section 8 Administrative Plan. Under Portability, a change was made by Board Resolution in August, 2003, requiring that all persons first submitting application for participation in the Housing Choice Voucher Program must lease a unit located within the jurisdiction of the Lexington Housing Authority for their first 12 months on the program. With this change all participants, no matter where they live or work at time of application are no long allowed to immediately take their Voucher and lease up outside the Lexington Housing Authority jurisdiction. This change in no way conflicts with any part of the Consolidated Plan for the State of Nebraska or the Comprehensive Plan for the City of Lexington

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# <u>6. Supporting Documents Available for Review for Streamlined Annual PHA Plans</u>

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review						
Applicable & On Display	Supporting Document	Related Plan Component				
-	PHA Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans				
	and Board Resolution to Accompany the Standard Annual, Standard Five-Year,					
X	and Streamlined Five-Year/Annual Plans;					
X	PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Streamlined Annual Plan	Streamlined Annual Plans				
X	Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.	5 Year and standard Annual Plans				
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair	5 Year and Annual Plans				
X	housing that require the PHA's involvement.  Housing Needs Statement of the Consolidated Plan for the jurisdiction(s) in which the PHA is located and any additional backup data to support statement of housing needs for families on the PHA's public housing and Section 8 tenant-based waiting lists.	Annual Plan: Housing Needs				
	Most recent board-approved operating budget for the public housing program	Annual Plan:				
X	D 11. 11	Financial Resources				
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure.	Annual Plan: Eligibility, Selection, and Admissions Policies				
	Deconcentration Income Analysis	Annual Plan: Eligibility, Selection, and Admissions Policies				
X	Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing.   Check here if included in the public housing A&O Policy.	Annual Plan: Eligibility, Selection, and Admissions Policies				
Α	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions				
X		Policies				
X	Public housing rent determination policies, including the method for setting public housing flat rents.  Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination				
	Schedule of flat rents offered at each public housing development.	Annual Plan: Rent				
X	☐ Check here if included in the public housing A & O Policy.	Determination				
	Section 8 rent determination (payment standard) policies (if included in plan, not necessary as a supporting document) and written analysis of Section 8 payment	Annual Plan: Rent Determination				
X	standard policies.  Check here if included in Section 8 Administrative Plan.  Public housing management and maintenance policy documents, including	Annual Plan: Operations				
X	policies for the prevention or eradication of pest infestation (including cockroach infestation).	and Maintenance				
	Results of latest Public Housing Assessment System (PHAS) Assessment (or	Annual Plan: Management				
X	other applicable assessment).  Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if	and Operations Annual Plan: Operations and				
	necessary)	Maintenance and Community Service & Self-				

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	List of Supporting Documents Available for Review	T = 1
Applicable & On Display	Supporting Document	Related Plan Component
		Sufficiency
X	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
X	Any policies governing any Section 8 special housing types  ☑ Check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures  Check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures.  Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures
X	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year.	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants.	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing.	Annual Plan: Capital Needs
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA).	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans).	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937.	Annual Plan: Conversion of Public Housing
X	Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion.	Annual Plan: Voluntary Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program (Sectionof the Section 8 Administrative Plan)	Annual Plan: Homeownership
X	Public Housing Community Service Policy/Programs  Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency
	Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies.	Annual Plan: Community Service & Self-Sufficiency
X	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing.	Annual Plan: Community Service & Self-Sufficiency
	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G).	Annual Plan: Pet Policy
X	Check here if included in the public housing A & O Policy.  The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that	Annual Plan: Annual Audit
X	audit and the PHA's response to any findings.  Other supporting documents (optional)	(specify as needed)
	(list individually; use as many lines as necessary)  Consortium agreement(s) and for Consortium Joint PHA Plans Only: Certification that consortium agreement is in compliance with 24 CFR Part 943 pursuant to an opinion of counsel on file and available for inspection.	Joint Annual PHA Plan for Consortia: Agency Identification and Annual Management and Operations

# 7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor Effective 12/31/2003

	nent/Performance and Evaluation Report					
Capital Fund I	Program and Capital Fund Program Replacemer	t Housing Factor	r (CFP/CFPRHF	F) Part I: Summa	ry	
PHA Name: Lexing		Grant Type and Numb			Federal FY	
			Grant No: NE26P01	050100	of Grant:	
		Replacement Housing I			2000	
	al Statement □Reserve for Disasters/Emergencies ☑Rev					
			d Evaluation Report			
Line No.	Summary by Development Account		timated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations	19,500	19,500	19,500	19,500	
3	1408 Management Improvements					
4	1410 Administration					
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	2,559	2,599	2,599	2,599	
8	1440 Site Acquisition					
9	1450 Site Improvement	27,500	27,500	27,500	23,919.76	
10	1460 Dwelling Structures	39,484.05	39,483.05	39,483.05	37,579.38	
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment	42,607.95	42,607.95	42,607.95	42,607.95	
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1501 Collaterization or Debt Service					
20	1502 Contingency					
21	Amount of Annual Grant: (sum of lines 2 – 20)	131,690		131,690	126,206.09	
22	Amount of line 21 Related to LBP Activities	0.00				
23	Amount of line 21 Related to Section 504	0.00				
	compliance					
24	Amount of line 21 Related to Security – Soft Costs	0.00				
25	Amount of Line 21 Related to Security – Hard	0.00				
	Costs					
26	Amount of line 21 Related to Energy Conservation	0.00				

# 7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor Effective 12/31/2003

# Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

PHA Name: Lexington Housing Authority		Grant Type and Number Capital Fund Program Grant No: NE26P01050100 Replacement Housing Factor Grant No:			Federal FY of Grant: 2000			
Development Number Name/HA- Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity		mated Cost	Total Actual Cost		Status of Work
NE010-001				Original	Revised	Funds Obligated	Funds Expended	
Eastlawn	Misc. Maint. Equip.	1406		9,500		9,500	9,500	Complete
	Occupied Interior Paint	1406		5,000		5,000	5,000	Complete
	Needs Assessment	1430		1,300		1,300	1,300	Complete
	Landscaping	1450		10,860		10,860	7,279.76	Incomplete
	REAC Insp. Renovation	1460		22,470.66		22,470.66	20,817.73	Incomplete
	Bathroom Storage Cabinet	1460		500	499	499	248.26	Incomplete
	Lg. Capacity Water Heaters	1475		18,119.34		18,119.34	18,119.34	Complete
NE010-002								
Scattered Sites	Occupied Interior Paint	1406		5,000		5,000	5,000	Complete
	Needs Assessment	1430		1,299		1,299	1,299	Complete
	Landscaping	1450		16,640		16,640	16,640	Complete
	REAC Insp. Renovation	1460		16,513.39		16,513.39	16,513.39	Complete
	Mini Van-Staff Transportation	1475		24,488.61		24,488.61	24,488.61	Complete
	Totals			131,690		131,690	126,206.09	

## 7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement

Annual Statement Capital Fund Pro				-	ement Housi	ing Factor	· (CFP/CFPRHF)		
Part III: Impleme	_	_		<b>P</b>		<b>g</b> - <b></b>	(==-,===,		
PHA Name: Lexington	Housing Auth	Federal FY of Grant: 2000							
		Capit Repla	al Fund Progran	n No: NE26P01 g Factor No:	050100				
Development	All	Fund Obliga	ited	All	Funds Expende	ed	Reasons for Revised Target Dates		
Number	(Quar	ter Ending l	Date)	(Qu	arter Ending Da	ite)			
Name/HA-Wide Activities									
	Original	Revised	Actual	Original	Revised	Actual			
NE010-001	06/30/2002		06/30/2002	09/30/2003	06/30/2004		Per HUD Obligation		
and 002							and Expenditure		
							Deadlines		

# 7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor Effective 12/31/2003

Annual Stateme	ent/Performance and Evaluation Report							
Capital Fund P	rogram and Capital Fund Program Replacemen	t Housing Factor	(CFP/CFPRHF	) Part I: Summa	rv			
	<u> </u>	Grant Type and Number						
Đ		Capital Fund Program Gra	of Grant:					
		Replacement Housing Fac			2001			
Original Annua	l Statement ☐Reserve for Disasters/ Emergencies ⊠Revi				•			
<b>⊠</b> Performance an	d Evaluation Report for Period Ending: 12/31/03 Fin	al Performance and I	<b>Evaluation Report</b>	:				
Line No.	Summary by Development Account	Total Estir	mated Cost	Total A	Actual Cost			
		Original	Revised	Obligated	Expended			
1	Total non-CFP Funds							
2	1406 Operations	39,000		39,000	39,000			
3	1408 Management Improvements							
4	1410 Administration							
5	1411 Audit							
6	1415 Liquidated Damages							
7	1430 Fees and Costs							
8	1440 Site Acquisition							
9	1450 Site Improvement							
10	1460 Dwelling Structures	87,753.51		87,753.51	85,414.40			
11	1465.1 Dwelling Equipment—Nonexpendable							
12	1470 Nondwelling Structures	2,141		2,141	2,141			
13	1475 Nondwelling Equipment	4,937.49		4,937.49	4,937.49			
14	1485 Demolition							
15	1490 Replacement Reserve							
16	1492 Moving to Work Demonstration							
17	1495.1 Relocation Costs							
18	1499 Development Activities							
19	1501 Collaterization or Debt Service							
20	1502 Contingency							
21	Amount of Annual Grant: (sum of lines 2 – 20)	133,832		133,832	131,492.89			
22	Amount of line 21 Related to LBP Activities	0.00						
23	Amount of line 21 Related to Section 504	4,117.43		4,117.43	4,117.43			
	compliance							
24	Amount of line 21 Related to Security – Soft Costs	0.00						
25	Amount of Line 21 Related to Security – Hard Costs	0.00						
26	Amount of line 21 Related to Energy Conservation	0.00						

### 7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement **Housing Factor** Effective 12/31/2003

### **Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages**

	kington Housing Authority	Grant Type and Capital Fund Pr		NE26P01005	0101	Federal FY of Gra	Federal FY of Grant: 2001		
Development Number Name/HA- Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity		mated Cost	Total Act	Status of Work		
NE010-001				Original	Revised	Funds Obligated	Funds Expended		
Eastlawn	Misc. Maint. Equip.	1406		3,000		3,000	3,000	Complete	
	Carpenter Salary & Bene.	1406		31,000		31,000	31,000	Complete	
	Shingles & Gutter Repair	1460		60,000		60,000	58,808.03	Incomplete	
	Replace Passage Lever Handles	1460		4,117.43		4,117.43	4,117.43	Complete	
	Bi-Fold Doors	1460		23,636.08		23,636.08	22,488.94	Incomplete	
	Work Room Cabinets	1470		2,141		2,141	2,141	Complete	
	Replace Laundryroom Equip.	1475		4,937.49		4,937	4,937	Complete	
NE010-002									
Scattered Sites	Interior Painting	1406		5,000		5,000	5,000	Complete	
	Totals			133,832		133,832	131,492		

### 7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement

Annual Statement				-		-	(677)			
Capital Fund Pro	gram and (	Capital F	und Prog	ram Replac	ement Housi	ing Factor	(CFP/CFPRHF)			
Part III: Impleme	entation Sc	chedule								
PHA Name: Lexington	Housing Author		Federal FY of Grant: 2001							
	_	Capita								
			cement Housin	•						
Development		Fund Obliga			Funds Expende		Reasons for Revised Target Dates			
Number	(Quart	ter Ending I	Date)	(Qua	arter Ending Da	ite)				
Name/HA-Wide										
Activities										
NE010-001	Original	Revised	Actual	Original	Revised	Actual				
And 002	06/30/2003		06/30/2003	06/30/2004						

# 7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor Effective 12/31/2003

**Annual Statement/Performance and Evaluation Report** Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary PHA Name: Lexington Housing Authority **Grant Type and Number** Federal FY of Grant: Capital Fund Program Grant No: NE26P010050102 2002 Replacement Housing Factor Grant No: Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: 2) Performance and Evaluation Report for Period Ending: 12/31/03 Final Performance and Evaluation Report **Summary by Development Account Total Estimated Cost Total Actual Cost** Line No. **Original** Revised **Obligated** Expended 46,620 Total non-CFP Funds 46,620 46,620 46,620 1406 Operations 1408 Management Improvements 1410 Administration 15.000 15,000 15,000 15.000 1411 Audit 1415 Liquidated Damages 6 1430 Fees and Costs 8 1440 Site Acquisition 1450 Site Improvement 10.545 10,545 10 1460 Dwelling Structures 19,553.36 13,901.71 11,625.73 11.625.73 1465.1 Dwelling Equipment—Nonexpendable 11 35,678.64 41,330.29 17,908.00 -()-1470 Nondwelling Structures 12 1475 Nondwelling Equipment 13 14 1485 Demolition 15 1490 Replacement Reserve 1492 Moving to Work Demonstration 16 17 1495.1 Relocation Costs 1499 Development Activities 18 1501 Collaterization or Debt Service 19 20 1502 Contingency 21 Amount of Annual Grant: (sum of lines 2-20) 127,397 127,397 93,429,71 73.245.73 22 Amount of line 21 Related to LBP Activities 23 Amount of line 21 Related to Section 504 15,278.64 7,837.94 -()compliance Amount of line 21 Related to Security – Soft Costs 24 25 Amount of Line 21 Related to Security – Hard 5,545 -()--0-Costs Amount of line 21 Related to Energy Conservation 26

# 7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor Effective 12/31/2003

# Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

PHA Name: Lex	kington Housing Authority	Grant Type and		NE26D01005	Federal FY of Grant: 2002			
		Replacement H	rogram Grant No ousing Factor Gr	: NE26P01005 rant No:	00102			
Development Number	General Description of Major Work Categories	Dev. Acct No.	Quantity		mated Cost	Total Act	ual Cost	Status of Work
Name/HA- Wide Activities								
NE010-001				Original	Revised	Funds Obligated	Funds Expended	
Eastlawn	Interior Painting	1406		5,000	5,000	5,000	5,000	Complete
	Grounds Lighting	1450		10,545	5,545	-0-	-0-	Incomplete
	Wrap Porch Poles	1460		1,285.44	1,285.44	1,285.44	1,285.44	Complete
	Bathroom Sink Cabinets	1465		23,582.74	15,000	7,902.00	-0-	Incomplete
	H/C Height Toilets	1465		15,278.64	15,278.64	10,006.00	-0-	Incomplete
	Window Covering	1465		-0-	11,051.65	-0-	-0-	Incomplete
NE010-002	Interior Painting	1406		5,000	5,000	5,000	5,000	Complete
Scattered Sites	Wrap Porch Poles	1460		1,285.43	1,285.43	1,285.43	1,285.43	Complete
	Screen Doors	1460		6,400	3,931.09	3,931.09	3,931.09	Complete
	Front Storm Doors	1460		4,841.49	4,841.49	4,841.49	4,841.49	Complete
HA Wide	Misc. Maint. Equip.	1406		5,000	5,000	5,000	5,000	Complete
	Carpenter Salary	1406		31,620	31,620	31,620	31,620	Complete
	Computer Equip.	1410		15,000	15,000	15,000	15,000	Complete
	REAC Renovation	1460		2,558.26	2,558.26	282.28	282.28	Incomplete
	Concrete	1450		-0-	5,000	-0-	-0-	Incomplete
	Totals			127,397	127,397	93,429.71	73,245.73	

# 7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement

<b>Annual Statement</b>				-						
Capital Fund Pro	gram and (	Capital	<b>Fund Prog</b>	ram Replac	ement Hous	ing Factor	(CFP/CFPRHF)			
Part III: Impleme	entation So	chedule								
PHA Name: Lexington	Housing Autho	Federal FY of Grant: 2002								
		Ca	pital Fund Program placement Housin	m No: NE26P010	050102					
Development	A11 F	Fund Obli		· · · · · · · · · · · · · · · · · · ·	Funds Expend	 ed	Reasons for Revised Target Dates			
Number		ter Endin			arter Ending Da		Reasons for Revised Target Dates			
Name/HA-Wide	(Quar	or Enam,	g Date)	(20.	arter Ending De					
Activities										
	Original	Revised	d Actual	Original	Revised	Actual				
NE010-001	06/30/2004			06/30/2006						
and 002										

# 7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor Effective 12/31/2003

	nent/Performance and Evaluation Report							
	Program and Capital Fund Program Replacemen			F) Part I: Summa	ry Federal FY			
PHA Name: Lexing	gton Housing Authority	Grant Type and Number						
		Capital Fund Program Grant No: NE26P01050103						
		Replacement Housing Fac			2003			
	al Statement Reserve for Disasters/ Emergencies Rev		` /					
		nal Performance and			A -41 Cl4			
Line No.	Summary by Development Account		mated Cost		Actual Cost			
		Original	Revised	Obligated	Expended			
1	Total non-CFP Funds							
2	1406 Operations	44,915		44,915	44,915			
3	1408 Management Improvements	5,600		5,600	5,600			
4	1410 Administration							
5	1411 Audit							
6	1415 Liquidated Damages							
7	1430 Fees and Costs							
8	1440 Site Acquisition							
9	1450 Site Improvement							
10	1460 Dwelling Structures	26,643		-0-	-0-			
11	1465.1 Dwelling Equipment—Nonexpendable	4,750		-0-	-0-			
12	1470 Nondwelling Structures							
13	1475 Nondwelling Equipment	17,000		-0-	-0-			
14	1485 Demolition	,						
15	1490 Replacement Reserve							
16	1492 Moving to Work Demonstration							
17	1495.1 Relocation Costs							
18	1499 Development Activities							
19	1501 Collaterization or Debt Service							
20	1502 Contingency							
21	Amount of Annual Grant: (sum of lines 2 – 20)	98,908		50,515	50,515			
22	Amount of line 21 Related to LBP Activities	,			,			
23	Amount of line 21 Related to Section 504							
· <del></del>	compliance							
24	Amount of line 21 Related to Security – Soft Costs							
25	Amount of Line 21 Related to Security – Hard							
-	Costs							
26	Amount of line 21 Related to Energy Conservation	12,250						

# 7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor Effective 12/31/2003

# Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

PHA Name: Lex	ington Housing Authority	Grant Type and Capital Fund Pr	rogram Grant No:	NE26P01050	0103	Federal FY of Grant: 2003			
		Replacement H	ousing Factor Gra						
Development	General Description of	Dev. Acct	Quantity	Total Esti	mated Cost	Total Act	ual Cost	Status of	
Number	Major Work Categories	No.	-					Work	
Name/HA-									
Wide									
Activities									
NE010-001				Original	Revised	Funds	Funds		
						Obligated	Expended		
Eastlawn	Interior Paint	1406		3,940	3,940	3,940	3,940	Complete	
	Kitchen Ceramic Tile	1460		1,000	1,000	-	-	Incomplete	
	Wire L.R. Ceilings	1460		7,500	7,500	-	-	Incomplete	
	L.R. Ceiling Fans	1465		4,750	4,750	-	-	Incomplete	
NE010-002	Interior Paint	1406		4,000	4,000	4,000	4,000	Complete	
Scattered Sites	Utility Room Cabinets	1460		16,000	13,400	-	-	Incomplete	
	Wooden Screen Doors	1460		-0-	2,600	-	-	Incomplete	
HA Wide	Misc. Maint. Equip.	1406		1,000	1,000	1,000	1,000	Complete	
	Carpenter Salary	1406		35,975	35,975	35,975	35,975	Complete	
	Computer Equipment	1408		5,600	5,600	5,600	5,000	Complete	
	REAC Renovations	1460		2,143	2,143	-	-	Incomplete	
	Lawn Mower	1475		17,000	17,000	-	-	Incomplete	
	Totals			98,908	98,908	50,515	50,515		

# 7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement

<b>Annual Statement</b>				-			
Capital Fund Prog	gram and	Capital F	'und Prog	ram Replac	ement Hous	ing Factor	(CFP/CFPRHF)
Part III: Impleme	entation S	chedule					
PHA Name: Lexington	Housing Autho	Federal FY of Grant: 2003					
		Capi	tal Fund Progra	m No: NE26P01	050103		
Development	A 11 1	Fund Oblig	acement Housin		Funds Expend	ad	Reasons for Revised Target Dates
Number		ter Ending			arter Ending Da		Reasons for Revised Target Dates
Name/HA-Wide	(Quai	ter Enting	Date)	(Qua	arter Ending Da	iic)	
Activities							
Tietrities	Original	Revised	Actual	Original	Revised	Actual	
NE010-001	09/19/2005	09/16/2005	11000001	09/16/2007	110 / 1500	1100001	Per HUD Obligation
& 002							and Expenditure
							Deadlines

Annual Statem	ent/Performance and Evaluation Report							
<b>Capital Fund P</b>	Program and Capital Fund Program Replacemen	t Housing Facto	r (CFP/CFPRHF)	Part I: Summary				
		Grant Type and Number						
		Capital Fund Program Grant No: NE26P01050203						
		Replacement Housing			2003			
	al Statement □Reserve for Disasters/ Emergencies ☑Rev							
			d Evaluation Report					
Line No.	Summary by Development Account		timated Cost		tual Cost			
		Original	Revised	Obligated	Expended			
1	Total non-CFP Funds							
2	1406 Operations							
3	1408 Management Improvements							
4	1410 Administration							
5	1411 Audit							
6	1415 Liquidated Damages							
7	1430 Fees and Costs							
8	1440 Site Acquisition							
9	1450 Site Improvement							
10	1460 Dwelling Structures	15,840	8,640	-0-	-0-			
11	1465.1 Dwelling Equipment—Nonexpendable	5,505	5,505	-0-	-0-			
12	1470 Nondwelling Structures	-0-	5,000	-0-	-0-			
13	1475 Nondwelling Equipment	-0-	2,200	-0-	-0-			
14	1485 Demolition							
15	1490 Replacement Reserve							
16	1492 Moving to Work Demonstration							
17	1495.1 Relocation Costs							
18	1499 Development Activities							
19	1501 Collaterization or Debt Service							
20	1502 Contingency							
21	Amount of Annual Grant: (sum of lines 2 – 20)	20,890	20,890					
22	Amount of line 21 Related to LBP Activities							
23	Amount of line 21 Related to Section 504							
	compliance							
24	Amount of line 21 Related to Security – Soft Costs							
25	Amount of Line 21 Related to Security – Hard							
	Costs							
26	Amount of line 21 Related to Energy Conservation	12,250	5,050					

**Housing Factor** Effective 12/31/2003

# Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: Lex	kington Housing Authority		NE26P01050 ant No:	0203	Federal FY of Grant: 2003		
Development Number Name/HA- Wide Activities	t General Description of Major Work Categories Dev. Acct No. Quantity Total Estimated Cost		mated Cost	Total Act	Status of Work		
NE010-001			Original	Revised	Funds Obligated	Funds Expended	
Eastlawn	Kitchen Ceramic Tile	1460	8,640	8,640	-0-	-0-	Incomplete
	Wire L.R. Ceilings	1460	7,200	-0-	-0-	-0-	Complete
	Livingroom Ceiling Fans	1465	5,050	5,050	-0-	-0-	Incomplete
	Comm. Space Update	1470	-0-	5,000	-0-	-0-	Incomplete
	Comm. Room Furniture	1475	-0-	2,200	-0-	-0-	Incomplete
NE010-002							
Scattered Sites							
HA Wide							
	Totals		20,890	20,890	-0-	-0-	

Annual Statement Capital Fund Pro				-	ement Housi	ng Factor	(CFP/CFPRHF)
Part III: Impleme	entation So	chedule					
PHA Name: Lexington	Housing Author		Federal FY of Grant: 2003				
Development Number Name/HA-Wide Activities		Fund Obliga ter Ending I			Funds Expende arter Ending Da		Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
NE010-001	02/13/06	02/12/06		09/16/2008	02/12/2008		Per HUD Obligation
& 002							and Expenditure
							Deadlines

<b>Capital Fund P</b>	Program and Capital Fund Program Replacemen	nt Housing Factor	(CFP/CFPRHI	F) Part I: Summar	·v			
	gton Housing Authority	Grant Type and Number Capital Fund Program Grant No: NE26P01050104 Replacement Housing Factor Grant No:						
Moriginal Annus	al Statement Reserve for Disasters/ Emergencies Rev			)				
		erformance and Evalu		)				
Line No.	Summary by Development Account	Total Estimated Cost Total Actual C						
		Original Revised		Obligated	Expended			
1	Total non-CFP Funds				-			
2	1406 Operations							
3	1408 Management Improvements							
4	1410 Administration							
5	1411 Audit							
6	1415 Liquidated Damages							
7	1430 Fees and Costs							
8	1440 Site Acquisition							
9	1450 Site Improvement							
10	1460 Dwelling Structures	50,000		-0-	-0-			
11	1465.1 Dwelling Equipment—Nonexpendable	18,908		-0-	-0-			
12	1470 Nondwelling Structures	·						
13	1475 Nondwelling Equipment	30,000		-0-	-0-			
14	1485 Demolition	,						
15	1490 Replacement Reserve							
16	1492 Moving to Work Demonstration							
17	1495.1 Relocation Costs							
18	1499 Development Activities							
19	1501 Collaterization or Debt Service							
20	1502 Contingency							
21	Amount of Annual Grant: (sum of lines 2 – 20)	98,908		-0-	-0-			
22	Amount of line 21 Related to LBP Activities							
23	Amount of line 21 Related to Section 504							
	compliance							
24	Amount of line 21 Related to Security – Soft Costs							
25	Amount of Line 21 Related to Security – Hard Costs							
26	Amount of line 21 Related to Energy Conservation	5,908		-0-	-0-			

**Housing Factor** Effective 12/31/2003

### **Annual Statement/Performance and Evaluation Report**

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

**Part II: Supporting Pages** 

porting Pages								
PHA Name: Lexington Housing Authority						Federal FY of Grant: 2004		
		Capital Fund Program Grant No: NE26P01050104						
							Ι	
· ·		Quantity	Total Estimated Cost Total Actual Cost			ual Cost	Status of	
Major Work Categories	No.						Work	
!								
!								
			Original	Revised	Funds	Funds		
!					Obligated	Expended		
Kitchen Light Fixtures	1465.1		5,908		-0-	-0-	Incomplete	
One Station Beauty Shop	1475		9,000		-0-	-0-	Incomplete	
Counter Top Replacement	1460		20,000		-0-	-0-	Incomplete	
Install Back Doors	1460		25,000		-0-	-0-	Incomplete	
Vertical Blinds	1465.1		10,000		-0-	-0-	Incomplete	
Cut & Install Mirrors	1465.1		3,000		-0-	-0-	Incomplete	
Maintenance Pickup	1475		20,000		-0-	-0-	Incomplete	
Interior Painting	1460						Incomplete	
REAC Renovations	1460		1,000		-0-	-0-	Incomplete	
Computer Equipment	1475		1,000		-0-	-0-	Incomplete	
Totals			00 000		0	0		
Totals			98,908		-0-	-0-		
4	General Description of Major Work Categories  Kitchen Light Fixtures One Station Beauty Shop  Counter Top Replacement Install Back Doors Vertical Blinds Cut & Install Mirrors  Maintenance Pickup Interior Painting REAC Renovations	ington Housing Authority  General Description of Major Work Categories  Kitchen Light Fixtures One Station Beauty Shop  Counter Top Replacement Install Back Doors Vertical Blinds Cut & Install Mirrors  Maintenance Pickup Interior Painting REAC Renovations Identify Indicate Install Indicate Install Ins	ington Housing Authority  Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Gra Replacement Housing Factor Gra Replacement Housing Factor Gra Dev. Acct No.  Kitchen Light Fixtures One Station Beauty Shop  Counter Top Replacement Install Back Doors Vertical Blinds Vertical Blinds Cut & Install Mirrors  Maintenance Pickup Interior Painting REAC Renovations 1460 Computer Equipment 1475  Capital Fund Program Grant No: Replacement Housing Factor Gra Dev. Acct No.  Quantity  Addinatity  Addina	Grant Type and Number   Capital Fund Program Grant No: NE26P01050   Replacement Housing Factor Grant No: NE26P01050   Major Work Categories   No.   Original	Grant Type and Number   Capital Fund Program Grant No: NE26P01050104   Replacement Housing Factor Grant No: New York Categories   Dev. Acct No.   Quantity   Total Estimated Cost   No.   No.   Program Grant No: New York Categories   No.   Original   Revised   Revised   No.   Revised   No.   Program Grant No: NE26P01050104   Revised   No.   Program Grant No: NE26P01050104   No.   No.   Program Grant No: New York No.   Program Grant No: New York No.   Program Grant No: New York No.   Program Grant No: No.   Program No.   Program No.   Program No.   P	General Description of Major Work Categories         Dev. Acct No.         Quantity         Total Estimated Cost         Federal FY of Grad For Grant No.           Major Work Categories         Dev. Acct No.         Quantity         Total Estimated Cost         Total Act Obligated           Kitchen Light Fixtures         1465.1         5,908         -0-           One Station Beauty Shop         1475         9,000         -0-           Counter Top Replacement         1460         20,000         -0-           Install Back Doors         1465.1         10,000         -0-           Vertical Blinds         1465.1         3,000         -0-           Cut & Install Mirrors         1465.1         20,000         -0-           Maintenance Pickup         1475         20,000         -0-           Maintenance Pickup         1475         20,000         -0-           REAC Renovations         1460         1,000         -0-           Computer Equipment         1475         1,000         -0-	General Description of Major Work Categories	

<b>Annual Statement</b>				_			
Capital Fund Prog			und Prog	ram Replac	ement Housi	ing Factor	(CFP/CFPRHF)
PHA Name: Lexington Housing Authority PHA Name: Lexington Housing Authority Capital Fund Program No: NE26P01050104 Replacement Housing Factor No:						Federal FY of Grant: 2004	
Development Number Name/HA-Wide Activities	Velopment All Fund Oblig Number (Quarter Ending e/HA-Wide			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
NE010-001	09/16/06			09/16/08			
& 002							
	†						

# 8. Capital Fund Program Five-Year Action Plan

Capital Fund P	rogram Fiv	ve-Year Action Plan				
Part I: Summar	<b>y</b>					
PHA Name Lexington Housing Authority				☐Original 5-Year Plan ☐Revision No: 3		
Development Number/Name/ HA-Wide	Year 1 2004	Work Statement for Year 2 FFY Grant: 2005	Work Statement for Year 3 FFY Grant: 2006	Work Statement for Year 4  FFY Grant: 2007	Work Statement for Year 5 FFY Grant: 2008	
		PHA FY: 2005	PHA FY: 2006	PHA FY: 2007	PHA FY: 2008	
NE01-001	Annual Statement	25,000	25,000	10,000	15,000	
Eastlawn			,	,	,	
NE010-002		47,000	39,908	10,000	9,000	
Scattered Sites						
HA Wide		26,908	34,000	78,908	74,908	
CFP Funds Listed for 5-year planning		98,908	98,908	98,908	98,908	
Replacement Housing Factor Funds						

# 8. Capital Fund Program Five-Year Action Plan

Capital Fu	nd Program Five-	Year Action Plan					
Part II: Su	pporting Pages—V	Work Activities					
Activities	Act	tivities for Year : 2	_	Activities for Year: <u>3</u>			
for		FFY Grant: 2005			FFY Grant: 2006		
Year 1		PHA FY: 2005	PHA FY: 200			6	
	Development Name/Number	Major Work Categories	<b>Estimated Cost</b>	Development Name/Number	Major Work Categories	Estimated Cost	
See	NE010-001	Insulation	15,000	NE010-001	Replace 24 Refrig	10,000	
Annual	Eastlawn	Kitchen Ceramic Tile	10,000	Eastlawn	Carpet & Pad	15,000	
Statement			25,000			25,000	
	NE010-002	Kitchen Cab. Repl.	30,000	NE010-002	Kitchen Cab. Repl.	32,000	
	Scattered Sites	Insulation	15,000	Scattered Sites	Water Softeners	7,908	
		Kitchen Ceramic Tile	2,000			39,908	
			47,000				
	HA Wide	Misc. Maint. Equip.	4,000				
		Office Renov.	5,000	HA Wide	Misc. Maint. Equip.	1,000	
		Interior Painting	5,000		Interior Painting	5,000	
		Computer Equip.	5,000		Computer Equip.	3,000	
		REAC Renovations	2,908		Mini Van	25,000	
		Concrete	5,000			34,000	
			26,908				
	Total CFP Estimated	l Cost	\$ 98,908			\$ 98,908	

# 8. Capital Fund Program Five-Year Action Plan

<b>Capital Fund Program Five-Year Action Plan</b>
<b>Part II: Supporting Pages—Work Activities</b>

Part II: Supportir	ng Pages—Work A	Activities					
	Activities for Year :	<u>4</u>	Activities for Year: <u>5</u> FFY Grant: 2008 PHA FY: 2008				
	FFY Grant: 2007						
	PHA FY: 2007						
Development Major Work Name/Number Categories		Estimated Cost	Development Name/Number	Major Work Categories	<b>Estimated Cost</b>		
NE010-001	Replace 25 Refrig.	10,000	NE010-001	Replace Ranges	15,000		
Eastlawn			Eastlawn				
		10,000			15,000		
			NE010 000	A 1:	4.000		
			NE010-002	Appliances	4,000		
			Scattered Sites	Faucets	5,000		
					9,000		
NE010-002	Water Heaters	8,000					
Scattered Sites	Appliances	2,000					
		10,000					
			HA Wide	Concrete	1,000		
HA Wide	Interior Painting	5,000		Interior Painting	5,000		
	Community Bldg.	70,000		Community Bldg.	65,000		
	Computer Equip.	2,500		Computer Equip.	2,500		
	REAC Renovations	1,408		REAC Renovations	1,408		
		78,908			74,908		
Total CFP Es	Total CFP Estimated Cost				\$ 98,908		

### 9. Resident Member on the PHA Governing Board

1. X Yes No:	Does the PHA governing board include at least one member who is directly assisted by the PHA this year?
A. Name of resident me	ember(s) on the governing board: Della Mae Courter
B. How was the resident Electer Appoint	

- C. The term of appointment is (include the date term expires): *December*, 2004
- B. Date of next term expiration of a governing board member: *December*, 2004
- C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): *Mayor John Fagot*

### 10. Membership of the Resident Advisory Board

List members of the Resident Advisory Board

Leon Stauffer
Mary Stauffer
Rosie Rogers
Mary Lara
Della Mae Courter
James Zeleski
Awilda Solis
Doyle Hemphill
Ruth Hemphill

Letters were sent to twenty individuals participating in Public Housing Elderly and Scattered Site programs and the Section 8 Housing Choice Voucher Program. Names of these individuals were chosen at random from all persons participating in the programs. The date and time of the Resident Advisory Board meeting was listed in the letters and the persons named above were the residents to participate. Copies of all policies and the 2004 Agency Plan Draft were made available to the RAB.

#### 11. Comments of the Resident Advisory Board

The Executive Director opened the meeting by reading the minutes of the 2003 Agency Plan Resident Advisory Board meeting. The Director then held a detailed discussion on improvements listed for each year of the five year plan.

As the list of improvements was being reviewed the Executive Director pointed out work projects that are scheduled to begin immediately or that have just begun. The higher toilets, bathroom sink cabinets and exterior lighting was all anxiously be awaited.

Comments at the meeting were as follows:

Many comments were made about the items already listed in the Five Year Plan for expanding the Capital Fund Grants. The Eastlawn Community Room updating and remodeling, attic insulation for both the apartments and the houses, the one stall beauty shop, the wiring and installation of ceiling fans in the livingrooms of the apartments, the utility room cabinets in the houses, the kitchen ceramic tile in the apartments and the installation of back doors in the two bedroom homes were all especially appreciated.

A request was made to consider installing wooden screen doors in the homes at the door leading from the house into the garage for air circulation.

A request was made to consider putting ceramic tile in the kitchens of the houses between the upper and lower cabinets.

The apartment dwellers requested that when carpet in replaced in the apartments that carpet padding be installed under the carpets.

Water softeners in the Scattered Site units were discussed again this year with the idea still being accepted, however, the potential financial hardship if the families have to purchase their own salt for the machines is still a concern.

The idea of saving funds to close Fillmore Street to build a new Community Building and offices was discussed again this year. There were still many positive comments made, with the loss of existing parking being discussed, however, the Executive Director gave assurances that parking was a concern that would be addressed.

A final discussion was held on how to keep the tiled floors shining at the houses. A suggestion was made to have a small floor polisher available to check out to tenants who wished to use it on their tile.

No further comments were made. Everyone felt the meeting was productive and wants to be invited again next year.

#### 12. MINUTES OF THE PUBLIC HEARING

### MINUTES OF THE PUBLIC HEARING HOUSING AUTHORITY OF THE CITY OF LEXINGTON MARCH 3, 2004

#### MEETING CALLED TO ORDER

The Commissioners of the Housing Authority of the City of Lexington met for a Public Hearing on the Lexington Housing Authority Agency Plan on Wednesday, March 3, 2004. The meeting was called to order by Chairman Helvey with the following Commissioners present: Helvey, Owens, Gutierrez, Courter and Saiz. Also present was Diane K. Adams, Executive Director. There was no general public in attendance, even though the meeting had been advertised in the Lexington Clipper Herald and posters had been placed in various locations around the city. One Staff person attended.

#### **ADJOURNMENT**

After waiting a reasonable time with no general public in attendance, Chairman Helvey declared the Public Hearing closed and the meeting adjourned.

### 13. PORTIONS OF THE REGULAR MARCH 24, 2004 MEETING

The Lexington Housing Authority Board of Commissioners considered all comments from the resident Advisory Board as follows:

The following is taken from the minutes of the regular meeting of the Lexington Housing Authority Board held on March 24, 2004.

### MINUTES OF THE REGULAR MEETING HOUSING AUTHORITY OF THE CITY OF LEXINGTON MARCH 24, 2004

#### MEETING CALLED TO ORDER

The Commissioners of the Housing Authority of the City of Lexington met for their Regular Meeting on Wednesday, March 24, 2004. The meeting was called to order by Chairman Helvey with the following Commissioners present: Helvey, Owens, Gutierrez, Courter, and Saiz. Also present was Diane K. Adams, Executive Director.

#### APPROVAL OF AGENDA

After review, a motion was made and seconded to approve the amended as presented. The Chairman called for a vote with all voting aye. Motion carried.

What follows is a portion of the minutes of the regular board meeting discussion of the Resident Advisory Board comments and the Resolution authorizing Chairman Helvey to sigh

the PHA Certifications of Compliance with the PHA Plans and Related Regulations Board Resolution to Accompany the PHA Plan.

# REVIEW DISCUSS AND CONSIDER RESIDENT ADVISORY BOARD COMMENTS

The Commissioners reviewed the comments of the Resident Advisory Board point by point as follows:

The Commissioners were pleased that the residents are looking forward to their higher toilets, bathroom sink cabinets, livingroom ceiling fans and the exterior lighting as well as updating and remodeling in the Eastlawn Community Room, attic insulation in the apartments and scattered site homes, installation of a one stall beauty shop, kitchen ceramic tile between upper and base cabinets in the apartments, cabinets in the scattered site laundry rooms and installation of back doors in the two bedroom houses that are currently in the Five Year Plan.

The request to have wooden screen doors installed at the door between the house and garage in the houses that have an outside door in the garage was considered and the Director was instructed to work that into the Capital Fund Grant.

The request to have ceramic tile installed in the kitchens of the houses between the upper and lower cabinets was discussed and the Director was instructed to insert the item into the Capital Fund Grand budget.

The apartment dwellers requested that when carpet is installed in the units that pad be used under the carpet instead of having the carpet glued down. The Commissioners agreed that could be done as carpet in replaced. The Director was instructed to add the price of pad to the carpet budget line item.

Members of the Resident Advisory Board felt water softeners would be nice, however if the tenant is responsible for purchasing the salt, it might become a financial burden. After more discussion this year, the Commissioners decided to leave this item in the Five Year Plan with the tenants being responsible to purchase the salt and fill the tanks. The Commissioners felt that maintenance could check the units when furnace filters are replaced and if the softener units are not being used the bypass handle could be engaged.

The Commissioners were pleased the Resident Advisory Board was still in favor of the idea of closing Fillmore Street to build a centrally located community room. After further discussion it is now possible that the office area will be expanded to fill the entire existing community room. The concern over the loss of existing parking was discussed again, and it is still felt that would be something an engineer could address and help design so parking would not be lost.

The final item discussed was how to keep the tile floors in the houses shining. Some members of the Resident Advisory Board wondered if a small floor polisher could be purchased and be checked out by residents who wanted to use it at their homes. The Commissioners felt that was a good suggestion which could be incorporated into the regular operating budget.

PHA Name: Lexington Housing Authority

HA Code: NE010

#### **RESOLUTION NUMBER 418**

The following resolution was introduced by Diane Adams, Executive Director; read in full and considered:

#### **RESOLUTION NUMBER 418**

BE IT RESOLVED by the Commissioners of the Housing Authority of the City of Lexington, Nebraska that the Chairman of the Housing Authority of the City of Lexington be authorized to sign the PHA Certifications of Compliance with the PHA Plans and Related Regulations Board Resolution to Accompany the PHA Plan.

Commissioner Gutierrez moved that the foregoing resolution be adopted as introduced and read, which motion was seconded by Commissioner Saiz and upon roll call the "Ayes" and "Nays" were as follows:

AYES NAYS Helvey None

Owens Gutierrez Courter Saiz

The Chairman thereupon declared said motion carried and said resolution adopted.

The remainder of the regular meeting followed.

#### **ADJOURNMENT**

There being no further business to come before the Authority, the Chairman declared the meeting adjourned.